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TRANSMITTAL FORM

Application Number	09/941,183
Filing Date	8-27-01
First Named Inventor	BIT-BABIK, GEORGI
Group Art Unit	2821
Examiner Name	Chen, Shih Chao
Add Davidson No.	C) (02 492) I

Total Number of Pages in this Submission	Attorney Docket No. CM	03482J			
	ENCLOSURES	(check a	ll that apply)		
x Fee Transmittal Form	Assignment Papers	After Al			
Fee Attached	(for an Application) Drawing(s)	Appeal (unication to Group Communication to Board als and Interferences		
X Amendment/Reply	Licensing-Related papers	Appeal (Communication to Group Notice, Brief, Reply Brief)		
After Final	Petition	Proprieta	ary Information		
Affidavits/Declaration(s)	Petition to Convert to a Provisional Application	Status La	etter with appropriate copies		
Extension of time Request	Power of Attorney, Revocation, Change of Correspondence		nclosure(s) (please identify below) ponse to Restriction Requirement		
Express Abandonment Request	Address	:	ociate Power of Attorney		
Information Disclosure Statement	Terminal Disclaimer				
Certified Copy of Priority Documents	Request for Refund				
Response to Missing Parts/	CD, Number of CDs				
Incomplete Application	Remarks				
Response to Missing Parts Under 37 CFR 1.52 or 1.53					
SIGNATURE O	F APPLICANT, ATTORNE	Y, OR AGENT	·		
Firm or Individual Barbara R. Doutre	Registration No.	39,505			
Signature Barbara R. Dultu					
Date 4/22/04					
CERTIFICATE OF MAILING					
I hereby certify that this correspondence is being					
first-class mail, in an envelope addressed to: Mail Stop Non-Fee Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on the date listed below:					
Typed or printed name Maria E. Rodriguez					
Signature Mau		Date	4/22/04		

Complete if Known

Application No. 09/941,183

Filing Date 8-27-01

First Named Inventor BIT-BABIK, GEORGI

Examiner Name Chen, Shih Chao

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$) 0.00 Attorney Docket No. CM03482J

TOTAL AMOUNT OF PAYMENT (\$) 0.00 Attorney Docket No. CM03482J						
METHOD OF PAYMENT (check all that apply)			FE	E CALC	CULATION (continued)	
☐ Check ☐ Credit card ☐ Money Order ☐ Other ☐ None		DITIONA	L FEES			
□ Deposit Account	Large	Entity	Small	Entity		
Deposit Account Number 50-2117	Fee	Fee	Fee	Fee		
Deposit Account Name Motorola, Inc.	Code	(\$)	Code	(\$)	Fee Description	Fee Paid
The Commissioner is hereby authorized to: (check all that apply)		130	2051	65	Surcharge - late filing fee or oath	
☐ Charge fee(s) indicated below ☐ Credit any overpayment		50	2052	25	Surcharge - late Provisional filing	
☐ Charge any additional fee(s) during the pendency of this application, except for issue fee		130	1053	130	Non-English specification	
☐ Charge fee(s) indicated below, except for the filing fee		2520	1812	2520	For filing a request for ex parte Reexamination	
to the above-identified deposit account. FEE CALCULATION		920*	1804	920°	Requesting publication of SIR	
1. BASIC FILING FEE	1804	320	1004	020	prior to Examiner action	
Large Entity Small Entity	1805	1840*	1805	1840*	Requesting publication of SIR	
Fee Fee Fee Fee <u>Fee Description</u> <u>Fee Paid</u>	1251	110	2251	55	after Examiner action Extension for reply within 1st month	<u> </u>
Code \$ Code \$ 1001 770 2001 370 Utility filing fee	1252	410	2252	200	Extension for reply within 2nd month	
1006 770 2006 370 Utility filing fee CPA	1253	930	2253	460	Extension for reply within 3rd month	
1002 330 2002 165 Design filing fee	1254	1450	2254	720	Extension for reply within 4th month	
1007 330 2007 165 Design filing fee CPA	1255	1970	2255 2401	980 160	Extension for reply within 5th month Notice of Appeal	
1003 510 2003 255 Plant filing fee 1004 750 2004 370 Reissue filing fee	1401 1402	320 320	2401	160	Filing a brief in support	
1004 750 2004 370 Reissde Hilling fee	1402	020	2.02	,00	of an appeal	
	1504		1504		Publication fee for early,	
SUBTOTAL (1) (\$)					voluntary, or normal publication	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1403	280	2403	140	Request for oral hearing	
	1505	300	1505	300	Publication fee for republication	
Fee from	1451	1510	1451	1510	Petition to institute a public use proceeding	
Extra below Fee Paid Claims	1452	110	2452	55	Petition to revive - unavoidable	
Total Claims 36 -53* = x 18 = 0	1453	1300	2453	640	Petition to revive - unintentional	
Independent	1501	1300	2501	640	Utility issue fee (or reissue)	
Claims 4 -7* = x 86 = 0	1502	470	2502	230	Design issue fee	
Multiple Dependent 280	1503	630	2503	310	Plant issue fee	
	1460	130	1460	50	Petitions to the Commissioner	
Laure Fating Compil Fating	1808	130	1808	130	Processing fee CFR 1.17(i) Processing fee for provisional	
Large Entity Small Entity	1807	50	1807	50	appls.	
Fee Fee Fee Fee Description	1806	180	1806	180	Submission of IDS	
Code \$ Code \$	8021	40	8021	40	Recording each patent assignment	
1202 18 2202 9 Claims in excess of 20	1				per property (times # of properties)	
1201 84 2201 42 Independent claims in excess of 3	1809	750	2809	370	Filing a submission after final	
1203 280 2203 140 Multiple dependent claim, if not paid	1	750	0010	970	rejection (37 CFR § 1.129(a)) For each additional invention to	<u> </u>
1204 84 2204 42 **Reissue independent claims	1810	750	2810	370	be examined (37 CFR § 1.129(b))	
over original patent 1205 18 2205 9 **Reissue claims in excess of 20	1801	750	2801	370	Request for Continued	
and over original patent	'00'	730	2001	3,0	Examination (RCE)	
SUBTOTAL (2) (\$)	1802	900	1802	900	Request for expedited examination	
		3.00			of a design application	
	1814	110	2814	55	Statutory Disclaimer	
	Other	fee (speci	fy)			
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**or number previously paid, if greater. For Reissues, see above	Heduce	d by Basic Fi	ung ree Pa		SUBTOTAL (3)	
SUBMITTED BY				Comp	lete (if applicable)	

SUBMITTED BY		Cor	nplete (if applicable)
Name (Print)	Barbara R. Doutre	Registration No. (Attorney/Agent	39,505
	1/2/1/24	Telephone: (954)	723-6449
Signature	Jawara K William	Date 4/22/0	4
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